

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

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S.D. SEC. OF STATE

1. TITLE OF NEWSPAPER BRYANT DAKOTAN		2. DATE 09-30-2020
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 50	3B. ANNUAL SUBSCRIPTION PRICE \$ 25-45
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 19242 Sauder Ave., PO Box 127, Bryant, SD 57221-0127		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) 19242 Sauder Ave., PO Box 127, Bryant, SD 57221-0127		
6. FULL NAME OF PUBLISHER: Stephanie Sauder		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)		
FULL NAME Stephanie Sauder		COMPLETE MAILING ADDRESS PO Box 94, Bryant, SD 57221
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.)		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	407	469
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales	46	46
2. Mail Subscription (Paid and or requested)	301	363
3. Paid Electronic Copies	14	15
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	361	424
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	10	10
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	10	10
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	382	444
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	15	15
2. Return from News Agents	10	10
G. TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	407	469

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Stephanie Sauder
(Signature)

owner/editor/publisher
(Title)

State of South Dakota)

Sworn to before me this 30th day of September 2020

County of Hamlin)

Kristie Sikkink
Notary Public

(Seal)



My commission expires: 2/9/23